

**FACSIMILE TRANSMISSION  
TO THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**TO: EXAMINER** Ori Nadav  
**ART UNIT** 2811  
**EXAMINER'S FAX NUMBER** (703) 872-9306  
**FROM: Peter Zawilski**

**RECEIVED  
CENTRAL FAX CENTER  
MAY 06 2004**

**OFFICIAL**

**REGISTRATION NUMBER:** 43,305  
**FAX NUMBER:** (408) 474-9082

**RE: SERIAL NO.** 09/389,826  
**DOCKET NO.** PHN 17073A

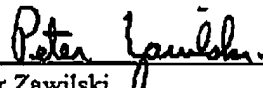
**2 Pages (including cover sheet)**

**This transmission includes:**

**SB-122 Change of Correspondence Address (1 pg.)**

**Certificate of Transmission under 37 CFR 1.8**

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office  
on May 6, 2004.

  
Peter Zawilski

**Intellectual Property & Standards  
Philips Electronics North American Corporation  
1109 McKay Drive; Mail Stop SJ41  
San Jose, CA 95131 USA  
Tel. (408) 434-3000**

PTO/SB/122 (10-01)  
Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>CHANGE OF CORRESPONDENCE ADDRESS</b>  <i>Application</i>  Address to: Assistant Commissioner for Patents Washington, D.C. 20231	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Application Number</td> <td>09/389,826</td> </tr> <tr> <td>Filing Date</td> <td>9/3/1999</td> </tr> <tr> <td>First Named Inventor</td> <td>Schroeder, Hans U.</td> </tr> <tr> <td>Art Unit</td> <td>2811</td> </tr> <tr> <td>Examiner Name</td> <td>Ori Nadav</td> </tr> <tr> <td>Attorney Docket Number</td> <td>PHN 17073A</td> </tr> </table>	Application Number	09/389,826	Filing Date	9/3/1999	First Named Inventor	Schroeder, Hans U.	Art Unit	2811	Examiner Name	Ori Nadav	Attorney Docket Number	PHN 17073A
Application Number	09/389,826												
Filing Date	9/3/1999												
First Named Inventor	Schroeder, Hans U.												
Art Unit	2811												
Examiner Name	Ori Nadav												
Attorney Docket Number	PHN 17073A												

Please change the Correspondence Address for the above-identified application to:

☒ Customer Number 24738 → 24738

OR *Type Customer Number here*

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		ZIP
Country				
Telephone		Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or Agent of record.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Typed or Printed Name	Peter Zawilski
Signature	<i>Peter Zawilski</i>
Date	06-MAY-2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.